Page 1 of 49 Document B1 (Official Form 1) (04/13) **United States Bankruptcy Court** DISTRICT OF NEW JERSEY **Voluntary Petition NEWARK DIVISION** Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): Barel, Karen All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): xxx-xx-9410 Street Address of Debtor (No. and Street, City, and State): Street Address of Joint Debtor (No. and Street, City, and State): 7 Lakeview Drive **Heritage Lakes** Hamburg, NJ ZIP CODE ZIP CODE 07419 County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: Sussex Mailing Address of Debtor (if different from street address): Mailing Address of Joint Debtor (if different from street address): ZIP CODE ZIP CODE Location of Principal Assets of Business Debtor (if different from street address above): ZIP CODE Nature of Business **Chapter of Bankruptcy Code Under Which** Type of Debtor (Form of Organization) (Check one box.) the Petition is Filed (Check one box.) (Check one box.) Health Care Business Chapter 7 Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) Chapter 9 Chapter 15 Petition for Recognition Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. of a Foreign Main Proceeding Chapter 11 Railroad Corporation (includes LLC and LLP) Chapter 15 Petition for Recognition Chapter 12 Stockbroker of a Foreign Nonmain Proceeding Partnership  $\square$ Chapter 13 Commodity Broker Other (If debtor is not one of the above entities, check Ш Clearing Bank this box and state type of entity below.) Nature of Debts Other (Check one box.) ✓ Debts are primarily consumer Chapter 15 Debtors Tax-Exempt Entity Debts are primarily Country of debtor's center of main interests: debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a (Check box, if applicable.) Debtor is a tax-exempt organization Each country in which a foreign proceeding by, regarding, or under title 26 of the United States personal, family, or houseagainst debtor is pending: Code (the Internal Revenue Code). hold purpose. Filing Fee (Check one box.) Check one box: **Chapter 11 Debtors** Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). Full Filing Fee attached. Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Debtor's aggregate noncontigent liquidated debts (excluding debts owed to insiders or affiliates) are less than 2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Filing Fee waiver requested (applicable to chapter 7 individuals only). Must Check all applicable boxes: attach signed application for the court's consideration. See Official Form 3B. A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. Estimated Number of Creditors Over 100,000 50-99 10,001-\_\_\_\_\_ 25,001-□ 50,001- $\overline{\mathbf{Q}}$ 100-199 200-999 1,000-5.001-100,000 5.000 10.000 25.000 50.000 **Estimated Assets** \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 \$50,000,001 \$100,000,001 \$500,000,001

to \$100 million

\$50,000,001

to \$100 million

to \$500 million

\$100,000,001

to \$500 million

\$0 to

\$50,000 \$100,000

Estimated Liabilities

\$50,000 \$100,000

\$50,001 to

\$500,000

\$500,000

\$100,001 to \$500,001

to \$1 million

to \$1 million

to \$10 million

\$1,000,001

to \$10 million

to \$50 million

\$10,000,001

to \$50 million

More than

\$1 billion

More than

\$1 billion

to \$1 billion

\$500,000,001

to \$1 billion

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Voluntary Petition

Name of Debtor(s): Karen Barel

Vo	luntary Petition	Name of Debtor(s): Karen Barel					
(Th	is page must be completed and filed in every case.)						
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)							
Locat <b>Non</b>	ion Where Filed: e	Case Number:	Date Filed:				
Locat	ion Where Filed:	Case Number:	Date Filed:				
	Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)						
Name <b>Non</b>	e of Debtor: <b>e</b>	Case Number:	Date Filed:				
Distric	st:	Relationship:	Judge:				
10Q)	Exhibit A  be completed if debtor is required to file periodic reports (e.g., forms 10K and with the Securities and Exchange Commission pursuant to Section 13 or 15(d) a Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.	Exhibit B  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).					
		X /s/ Scott J. Goldstein	9/30/2015				
		Scott J. Goldstein	Date				
Does Does							
	Ext	nibit D					
	(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  ☑ Exhibit D, completed and signed by the debtor, is attached and made a part of this petition.  If this is a joint petition:  ☐ Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.						
	Information Regard	ing the Debtor - Venue					
		applicable box.)					
Ø	Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180 days		trict for 180 days immediately				
	There is a bankruptcy case concerning debtor's affiliate, general partners	er, or partnership pending in this Distri	ct.				
	Debtor is a debtor in a foreign proceeding and has its principal place of principal place of business or assets in the United States but is a defe or the interests of the parties will be served in regard to the relief sough	endant in an action or proceeding [in a f					
	Certification by a Debtor Who Resid (Check all ap	es as a Tenant of Residential Proper plicable boxes.)	rty				
	Landlord has a judgment against the debtor for possession of debtor's	. ,	the following.)				
	(1)	Name of landlord that obtained judgme	nt)				
	(Address of landlord)						
	Debtor claims that under applicable nonbankruptcy law, there are circumonetary default that gave rise to the judgment for possession, after t						
	Debtor has included with this petition the deposit with the court of any petition.	, ,					
	Debtor certifies that he/she has served the Landlord with this certificat	ion. (11 U.S.C. § 362(I)).					

1 (Official Form 1) (04/13) Documen	
Voluntary Petition	Name of Debtor(s): Karen Barel
This page must be completed and filed in every case)	
Sig	natures
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
declare under penalty of perjury that the information provided in this petition is rue and correct.  If petitioner is an individual whose debts are primarily consumer debts and has thosen to file under chapter 7] I am aware that I may proceed under chapter 7,	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.
1, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.	(Check only one box.)
If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).	I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
X /s/ Karen Barel	
Karen Barel	X
<b>X</b>	(Signature of Foreign Representative)
Telephone Number (If not represented by attorney)	(Printed Name of Foreign Representative)
9/30/2015 Date	Date
Signature of Attorney*    Ist   Scott J. Goldstein	Signature of Non-Attorney Bankruptcy Petition Preparer I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
Phone No.(973) 453-2838 Fax No.(973) 453-2869	Printed Name and title, if any, of Bankruptcy Petition Preparer
9/30/2015  Date In a case in which § 707(b)(4)(D) applies, this signature also constitutes a	Social-Security number (If the bankruptcy petition preparer is not an individual,
retrification that the attorney has no knowledge after an inquiry that the aftornation in the schedules is incorrect.	state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Signature of Debtor (Corporation/Partnership)  declare under penalty of perjury that the information provided in this petition is rue and correct, and that I have been authorized to file this petition on behalf of he debtor.	
The debtor requests relief in accordance with the chapter of title 11, United States	Address

Signature of	Authorized	Individual	
Printed Nam	e of Authori	zed Individual	
Γitle of Autho	orized Indiv	idual	

Date

Signature of bankruptcy petiton preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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## B 1D (Official Form 1, Exhibit D) (12/09) UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY **NEWARK DIVISION**

In re:	Karen Barel	Case No.	
			(if known)

Debtor(s)

#### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit couseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during he seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

# B 1D (Official Form 1, Exhibit D) (12/09) UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

In re:	Karen Barel	Case No.	
			(if known)

Debtor(s)

Debtor(s)
EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT
Continuation Sheet No. 1
4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]
Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilites.);
Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Karen Barel
Karen Barel
Date: 9/30/2015

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B6A (Official Form 6A) (12/07)

In re	Karen Barel	Case No.	
			(if known)

#### **SCHEDULE A - REAL PROPERTY**

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
Townhouse 114 Warbler Drive Wayne, NJ 07470	Joint Tenancy	-	\$382,000.00	\$475,232.15
Property has two foreclosure cases pending, HOA and primary mortgage. Debtor will surrender to all creditors. Debtor does not reside in the property pursuant to Marital Settlement Agreement.				

Total: \$382,000.00 (Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re Karen Barel	Case No.	
		(if known)

## **SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash on hand	-	\$100.00
Checking, savings or other financial accounts, certificates of deposit		Vision Credit Union account ending in 7277	-	\$900.00
or shares in banks, savings and loan, thrift, building and loan, and home- stead associations, or credit unions, brokerage houses, or cooperatives.		Atlantic Stewardship Bank checking account ending in 2837	-	\$3,734.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	x			
4. Household goods and furnishings, including audio, video and computer equipment.		Miscellaneous household goods and furnishings at 7 Lakeview Drive, Hamburg, New Jersey	-	\$3,460.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	x			
6. Wearing apparel.		Miscellaneous wearing apparel located at 7 Lakeview Drive, Hamburg, New Jersey	-	\$1,500.00
7. Furs and jewelry.		Wedding ring	-	\$1,500.00
8. Firearms and sports, photographic, and other hobby equipment.	x			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			

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B6B (Official Form 6B) (12/07) -- Cont.

In re Karen Barel	Case No.	
		(if known)

## **SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 1

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.		TIAA Cref Retirement Portfolio	-	\$10,000.00
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	x			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	x			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	x			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	x			
16. Accounts receivable.	x			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	x			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	x			

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B6B (Official Form 6B) (12/07) -- Cont.

In re Karen Barel	Case No.	
		(if known)

## **SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 2

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	x			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x			
22. Patents, copyrights, and other intellectual property. Give particulars.	x			
23. Licenses, franchises, and other general intangibles. Give particulars.	x			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	x			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	x			
26. Boats, motors, and accessories.	x			

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B6B (Official Form 6B) (12/07) -- Cont.

In re Karen Barel	Case No.	
		(if known)

#### **SCHEDULE B - PERSONAL PROPERTY**

Continuation Sheet No. 3

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
27. Aircraft and accessories.	x			
28. Office equipment, furnishings, and supplies.	x			
29. Machinery, fixtures, equipment, and supplies used in business.	x			
30. Inventory.	x			
31. Animals.		Horse	-	\$0.00
32. Crops - growing or harvested. Give particulars.	x			
33. Farming equipment and implements.	x			
34. Farm supplies, chemicals, and feed.	x			
35. Other personal property of any kind not already listed. Itemize.	x			
		continuation sheets attached	 	\$21,194.00

\$21,194.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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B6C (Official Form 6C) (4/13)

In re Karen B	arel
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Case No.	
	(If known)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)	Check if debtor claims a homestead exemption that exceeds \$155,675.*
11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on hand	11 U.S.C. § 522(d)(5)	\$100.00	\$100.00
Vision Credit Union account ending in 7277	11 U.S.C. § 522(d)(5)	\$900.00	\$900.00
Atlantic Stewardship Bank checking account ending in 2837	11 U.S.C. § 522(d)(5)	\$3,734.00	\$3,734.00
Miscellaneous household goods and furnishings at 7 Lakeview Drive, Hamburg, New Jersey	11 U.S.C. § 522(d)(3)	\$3,460.00	\$3,460.00
Miscellaneous wearing apparel located at 7 Lakeview Drive, Hamburg, New Jersey	11 U.S.C. § 522(d)(3)	\$1,500.00	\$1,500.00
Wedding ring	11 U.S.C. § 522(d)(4)	\$1,500.00	\$1,500.00
	11 U.S.C. § 522(d)(5)	\$0.00	
TIAA Cref Retirement Portfolio	11 U.S.C. § 522(b)(3)(C)	\$10,000.00	\$10,000.00
* Amount subject to adjustment on 4/01/16 and every thre commenced on or after the date of adjustment.	I be years thereafter with respect to cases	\$21,194.00	\$21,194.00

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B6D (Office	ial Fo	rm 6D)	(12/07)
	In re	Karen	Barel

Case No.	
	(if known)

#### **SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT#: xxxxx6844			DATE INCURRED: NATURE OF LIEN: Mortgage / Agreement COLLATERAL:					
Green Tree Servicing, LLC 345 St. Peter Street Saint Paul, MN 55102	x	-	COLLATERAL: Townhouse REMARKS:				\$453,509.43	\$71,509.43
			VALUE: \$382,000.00					
Representing: Green Tree Servicing, LLC			Phelan Hallinan and Diamond, PC 400 Fellowship Road Mount Laurel, NJ 08054-0000				Notice Only	Notice Only
Representing: Green Tree Servicing, LLC			Superior Court of New Jersey 77 Hamilton Street Paterson, NJ 07505-0000				Notice Only	Notice Only
ACCT#:			DATE INCURRED: <b>various</b> NATURE OF LIEN:					
Stonebridge at Wayne c/o Piekarsky & Associates 191 Godwin Avenue, Suite 9 Wyckoff, NJ 07481	x	-	HOA Dues COLLATERAL: Townhouse REMARKS:				\$21,722.72	\$21,722.72
			VALUE: \$382,000.00		Ш			
			Subtotal (Total of this F	_	•	ŀ	\$475,232.15	\$93,232.15
			Total (Use only on last ۽	oag	e) >	·		

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

\_\_\_\_continuation sheets attached

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B6D (Official Form 6D) (12/07) - Cont. In re Karen Barel

Case No.	
	(if known)

#### **SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Representing: Stonebridge at Wayne			Piekarsky and Associates 191 Godwin Avenue, Suite 9 Wyckoff, NJ 07481				Notice Only	Notice Only
Representing: Stonebridge at Wayne			Superior Court of New Jersey 77 Hamilton Street Paterson, NJ 07505-0000				Notice Only	Notice Only
					Ļ	Ц	** **	40.0-
Sheet no of continuation to Schedule of Creditors Holding Secured Claims		sheet		_			\$0.00	\$0.00
to Schedule of Creditors Holding Secured Claims  Total (Use only on last page) > \$475,232.15 \$93,232.15								

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

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B6E (Official Form 6E) (04/13)

In re Karen Barel

Case No.	
	(If Known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

V	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
ΤY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)
	Domestic Support Obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals  Claims of individuals up to \$2,775* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governor of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).
	Administrative allowances under 11 U.S.C. Sec. 330  Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.
	mounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of istment.
	Nocontinuation sheets attached

Document

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B6F (Official Form 6F) (12/07) In re Karen Barel

Case No.		
	(if known)	

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. CREDITOR'S NAME, HUSBAND, WIFE, JOINT, OR COMMUNITY DATE CLAIM WAS **AMOUNT OF** UNLIQUIDATED MAILING ADDRESS **INCURRED AND** CLAIM CONTINGENT DISPUTED INCLUDING ZIP CODE, **CONSIDERATION FOR** AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. DATE INCURRED: 10/05/2000 ACCT#: xxxxxxxxxxxx1663 CONSIDERATION Credit Card **AMEX** \$2,625.00 P.O. BOX 981537 REMARKS: **EL PASO, TX 79998** DATE INCURRED: ACCT#: CONSIDERATION **Ariel Barel Equitable Distribution** Unknown 114 Warbler Drive REMARKS  $\mathbf{X} \mathbf{X}$ X Wayne, NJ 07470 Potential claims for equitable distribution DATE INCURRED: 08/08/2001 ACCT#: xxxxxxxxxxxx6023 CONSIDERATION:
Home Equity Line of Credit **PNC BANK** \$0.00 **103 BELLEVUE PKWY** REMARKS: **WILMINGTON, DE 19809** DATE INCURRED: 09/23/1996 CONSIDERATION: ACCT#: xxxxxxxxxxxx4067 SYNCB/JCP Charge Account \$0.00 PO BOX 965007 REMARKS: ORLANDO, FL 32896 Subtotal > \$2,625.00 Total > \$2,625.00 (Use only on last page of the completed Schedule F.) No continuation sheets attached (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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B6G (Official Form 6G) (12/07)

In re Karen Barel

Case No.		
	(if known)	

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☑ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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B6H (	Official Form 6H) (12/07)	-	_	_	5
In re	Karen Barel				

Case No.	
	(if known)

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eightyear period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

al this boy if dobtor be . . . .

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Ariel Barel	Green Tree Servicing, LLC
114 Warbler Drive	345 St. Peter Street
Wayne, NJ 07470	Saint Paul, MN 55102
Ariel Barel	Stonebridge at Wayne
114 Warbler Drive	c/o Piekarsky & Associates
Wayne, NJ 07470	191 Godwin Avenue, Suite 9 Wyckoff, NJ 07481

				cument	Pag	ല 18	<u>of 4</u> 9	
L	ill in this inform	ation to identify	your case:					
	Debtor 1	Karen		Barel				
		First Name	Middle Name	Last Na	ame		Che	ck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame		_	An amended filing
			DISTRICT OI					A supplement showing post-petition
	United States Bankru Case number	uptcy Court for the:	DISTRICT OF	NEW JERS	<u> </u>		- -	chapter 13 income as of the following date:
	(if known)							MM / DD / YYYY
<b>○</b>	fficial Form B 6	21						
_	chedule I: You	<del></del>						12/13
res inc abo you	ponsible for supply lude information ab out your spouse. If ur name and case no	ing correct information your spouse. I more space is need	ntion. If you are f you are separ ded, attach a se Answer every q	married and ated and your parate sheet t	not filing spouse	jointly is not t	, and your siling with y	Debtor 2), both are equally spouse is living with you, ou, do not include information any additional pages, write
1.	Fill in your employ							
	information.			Debtor 1				Debtor 2 or non-filing spouse
	If you have more the job, attach a separa		ment status	<b></b> Employe	ed			☐ Employed
	with information ab	out		☐ Not emp	oloyed			☐ Not employed
	additional employe	rs. Occup	ation	Teacher				
	Include part-time, s or self-employed w		yer's name	Wayne Tw <sub>l</sub>	o. BOE			
	Occupation may in	clude <b>Emplo</b>	yer's address	50 Nellis D	rive			
	student or homema applies.	aker, if it		Number Stree	t			Number Street
	.,							_
				Wayne		NJ	07470	
				City		State	Zip Code	City State Zip Code
		How Io	ng employed th	nere? 10 y	ears			
			<b>3</b> 1 1 7 1 1				_	
P	art 2: Give D	etails About Mo	nthly Incom	е				
	timate monthly inco		ou file this forn	n. If you have	nothing to	report	for any line	, write \$0 in the space. Include your
	ou or your non-filing s			er, combine the	informat	ion for	all employer	rs for that person on the lines below. If
you	Theed more space, a	macri a separate sin				For D	ebtor 1	For Debtor 2 or non-filing spouse
2.		s wages, salary, ar . If not paid monthly			2. age		\$8,527.64	
3.	Estimate and list r	monthly overtime p	ay.		3.	+	\$0.00	
4.	Calculate gross in	ncome. Add line 2 -	line 3.		4.		\$8,527.64	

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Debtor 1 Karen First Name Middle Name Last Name

				For Debtor 1		or Debto		<u> </u>	
	Сор	y line 4 here	4.	\$8,527.64					
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$2,586.80					
	5b.	Mandatory contributions for retirement plans	5b.	\$590.11					
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00					
	5d.	Required repayments of retirement fund loans	5d.	\$0.00					
	5e.	Insurance	5e.	\$255.92					
	5f.	Domestic support obligations	5f.	\$0.00					
	5g.	Union dues	5g.	\$112.00					
	5h.	Other deductions. Specify:	5h. <b>+</b>	\$0.00					
6.	<b>Add</b> 5g +	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.	6.	\$3,544.83					
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,982.81					
8.		all other income regularly received:							
		Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00					
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b.	Interest and dividends	8b.	\$0.00					
		Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00					
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d.	Unemployment compensation	8d.	\$0.00					
		Social Security	8e.	\$0.00					
		Other government assistance that you regularly receive							
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.							
		Specify:	8f.	\$0.00					
	8g.	Pension or retirement income	- 8g.	\$0.00					
	8h.	Other monthly income. Specify: FDU	8h. <b>+</b>	\$416.67					
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$416.67					
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$5,399.48	+			=	\$5,399.48
11.	Inclu	te all other regular contributions to the expenses that you list in Stude contributions from an unmarried partner, members of your households or relatives.			ur roc	ommates,	and ot	her	
		not include any amounts already included in lines 2-10 or amounts tha	t are n	ot available to pay	expe	nses liste		hed	
	Spe	cify:					11.	+	\$0.00
12.	inco	the amount in the last column of line 10 to the amount in line 11. me. Write that amount on the Summary of Schedules and Statistical ated Data, if it applies.					12.		\$5,399.48 Combined
12	Do.	you expect an increase or decrease within the year after you file t	hie for	m?					monthly income
13.		No. Debtor is getting married.	1110 6111	:					
	✓	Yes. Explain:							

Page 20 of 49 Case number (if known) Document Debtor 1 Karen First Name Middle Name Last Name Additional Employers Debtor 1 Debtor 2 or non-filing spouse teacher/Instructor Occupation Fairleigh Dickinson University Employer's name 1000 River Road Employer's address Teaneck, NJ Zip Code City Zip Code How long employed there? 1 year

Case 15-28409-VFP

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Case 15-28409-VFP Filed 09/30/15 Entered 09/30/15 15:21:38 Desc Main Page 21 of 49 Document Fill in this information to identify your case: Check if this is: Debtor 1 Karen Barel An amended filing First Name Middle Name Last Name A supplement showing post-petition chapter 13 expenses as of the Debtor 2 following date: (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY MM / DD / YYYY A separate filing for Debtor 2 because Case number (if known) Debtor 2 maintains a separate household Official Form B 6J Schedule J: Your Expenses 12/13 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Debtor 2 must file a separate Schedule J. Do you have dependents? **☑** No Dependent's relationship to Dependent's Does dependent Yes. Fill out this information Do not list Debtor 1 and live with you? Debtor 1 or Debtor 2 for each dependent..... Debtor 2. No Yes Do not state the dependents' names. Yes No Yes No Yes Do your expenses include **☑** No expenses of people other than Yes yourself and your dependents? Part 2: **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.) Your expenses The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. 4b. Property, homeowner's, or renter's insurance 4b. 4c. Home maintenance, repair, and upkeep expenses 4c. \$200.00

Doc 1

4d. Homeowner's association or condominium dues

4d.

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Page 22 of 49 Case number (if known) Document Debtor 1 Karen Middle Name First Name Last Name Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and 6c. \$128.17 cable services 6d. Other. Specify: Food and housekeeping supplies 7. \$500.00 Childcare and children's education costs 8. 9. Clothing, laundry, and dry cleaning 9. \$250.00 10. Personal care products and services 10. \$300.00 11. Medical and dental expenses 11. \$450.00 Transportation. Include gas, maintenance, bus or train 12. \$500.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, \$200.00 13. magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$89.27 15b. Health insurance 15b. 15c. Vehicle insurance 15c. \$91.67 15d. Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. 16. Taxes. Specify: 17. Installment or lease payments: 17a. Car payments for Vehicle 1 Payment for car that friend permits her 17a. \$415.00 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I). 19. Other payments you make to support others who do not live with you. 19. \$100.00 Specify: Assistance to elderly mother Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20b. 20c. Property, homeowner's, or renter's insurance 20c. 20d. Maintenance, repair, and upkeep expenses 20d.

20e. Homeowner's association or condominium dues

21. Other. Specify: See continuation sheet

\$1,637.50

20e 21.

Dah		se 15-28409-	·VFP	Doc 1	Filed 09/30/ Document			9/30/15 15:2 e number (if known)		Desc Main
Deb	tor 1 Ka	ren t Name	Middle N	ame	Last Name		Case	e number (if known)	·	
	1 110	rvaino	Wildale 14	amo	Edot Hamo					
22.		onthly expenses. Ilt is your monthly e		4 through 2	1.			22.		\$4,861.61
23.	Calculat	te your monthly ne	t income							
	23a. C	opy line 12 (your co	mbined m	onthly incor	ne) from Schedule I.			23a.		\$5,399.48
	23b. C	opy your monthly ex	kpenses fi	om line 22 a	above.			23b. <b>–</b>		\$4,861.61
		ubtract your monthly he result is your mo			monthly income.			23c.		\$537.87
24.	Do you	expect an increase	or decre	ase in your	expenses within th	e year	after you file this	form?		
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?									
	□ No.									
	✓ Yes									
		Debtor's older	horse is	in ill heal	th and will likely d	lie so	on, thus horse o	costs will dimini	sh.	

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Document Debtor 1 Karen First Name Middle Name Last Name

21. Other. Specify:

**Expenses for horse** \$750.00 Storage Unit \$300.00 \$300.00 Assistance to children Temple dues \$50.00 Class room expenses \$100.00 Gym membership \$37.50 \$100.00 Dog expenses - medication/food

> Total: \$1,637.50

B 6 Summary (Official Form 6 - Summary) (12/14)

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UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

In re Karen Barel Case No.

Chapter 13

## **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$382,000.00		
B - Personal Property	Yes	4	\$21,194.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		\$697,867.11	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	1		\$2,625.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			\$5,399.48
J - Current Expenditures of Individual Debtor(s)	Yes	4			\$4,861.61
	TOTAL	19	\$403,194.00	\$700,492.11	

B 6 Summary (Official Form 6 - Summary) (12/14)

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# UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

In re Karen Barel Case No.

Chapter 13

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$0.00

#### State the following:

Average Income (from Schedule I, Line 12)	\$5,399.48
Average Expenses (from Schedule J, Line 22)	\$4,861.61
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$6,724.42

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$93,232.15
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
Total from Schedule F		\$2,625.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$95,857.15

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In re Karen Barel Case No. (if known)

# DECLARATION CONCERNING DEBTOR'S SCHEDULES DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.				
Date <u>9/30/2015</u>	Signature /s/ Karen Barel Karen Barel			
Date	Signature			
	[If joint case, both spouses must sign.]			

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B7 (Official Form 7) (04/13)

## UNITED STATES BANKRUPTCY COURT **DISTRICT OF NEW JERSE NEWARK DIVISION**

In re:	Karen Barel	Case No.	
			(if known)

#### STATEMENT OF FINANCIAL AFFAIRS

1. Income from employment or operation of business	1.	Income	from e	employ	ment c	r opera	ation o	of busi	ness
--	----	--------	--------	--------	--------	---------	---------	---------	------

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the TWO YEARS immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** SOURCE

\$84,583.00 2013 AGI from employment

2014 AGI from employment \$98,378.00

\$60,176.00 2015 YTD income from employment

#### 2. Income other than from employment or operation of business

 $\checkmark$ 

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the TWO YEARS immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

 $\overline{\mathbf{Q}}$ 

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 DAYS immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None  $oldsymbol{
abla}$ 

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 DAYS immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None  $\sqrt{\phantom{a}}$ 

c. All debtors: List all payments made within ONE YEAR immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

B7 (Official Form 7) (04/13)

## UNITED STATES BANKRUPTCY COURT **DISTRICT OF NEW JERSEY NEWARK DIVISION**

In re:	Karen Barel	Case No.	
			(if known)

#### STATEMENT OF FINANCIAL AFFAIDS

	3	Continuation Shee					
	4. Suits and administrative proce	edings, executions, garnis	shments and attachmen	uts			
None							
	CAPTION OF SUIT AND CASE NUMBER GMAC Mortgage, LLC v. Karen Barel et al Docket No. F-37098-08	NATURE OF PROCEEDING Foreclosure	COURT OR AGENCY AND LOCATION Superior Court of New Jersey Chancery Division: Passaic County 77 Hamilton Street Paterson, NJ 07505	STATUS OR DISPOSITION			
	Stonebridge HOA v. Ariel Barel et al Docket No. F-43381-14	Foreclosure	Superior Court of New Jersey Chancery Division: Passaic County 77 Hamilton Street Paterson, NJ 07505	Open			
None	b. Describe all property that has been attar preceding the commencement of this case either or both spouses whether or not a join	. (Married debtors filing under char	oter 12 or chapter 13 must inclu	ude information concerning property of			
None	<b>5. Repossessions, foreclosures a</b> List all property that has been repossessed to the seller, within ONE YEAR immediately include information concerning property of joint petition is not filed.)	I by a creditor, sold at a foreclosure y preceding the commencement of	f this case. (Married debtors fil	ling under chapter 12 or chapter 13 must			
None	6. Assignments and receivership a. Describe any assignment of property for case. (Married debtors filing under chapter is filed, unless the spouses are separated a	r the benefit of creditors made with 12 or chapter 13 must include an					
None	b. List all property which has been in the h	ands of a custodian, receiver, or c	ourt-appointed official within O	NE YEAR immediately preceding the			

None  $\overline{\mathbf{V}}$ 

commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

List all gifts or charitable contributions made within ONE YEAR immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

 $\overline{\mathbf{V}}$ 

List all losses from fire, theft, other casualty or gambling within ONE YEAR immediately preceding the commencement of this case OR SINCE THE COMMENCEMENT OF THIS CASE. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

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B7 (Official Form 7) (04/13)

# UNITED STATES BANKRUPTCY COURT **DISTRICT OF NEW JERSEY**

**NEWARK DIVISION** 

In re:	Karen Barel	Case No.	
			(if know

	STATEME	NT OF FINANCIAL AF Continuation Sheet No. 2	FFAIRS			
	9. Payments related to debt counseling or be	ankruptcy				
None						
	NAME AND ADDRESS OF PAYEE Law Offices of Scott J. Goldstein, LLC 280 West Main Street Denville, NJ 07834	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 4/3/2015	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$1000 allocated as follows: \$500 for legal fees, \$310 filing fee, \$38 credit report, \$152 postage and due dilligence			
None	a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred					
None	similar device of which the deptor is a deneticiary.					
None	List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise					
	12. Safe deposit boxes					

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY **Atlantic Stewardship Bank** 87 Berdan Avenue **Wayne, NJ 07470** 

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO **BOX OR DEPOSITORY** Jared Barel Debtor

**DESCRIPTION OF CONTENTS** Debtor's mother's jewelry. The Debtor has no interest in this property.

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 DAYS preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

B7 (Official Form 7) (04/13)

# UNITED STATES BANKRUPTCY COURT **DISTRICT OF NEW JERSEY NEWARK DIVISION**

In re:	Karen Barel	Case No.	
			(if known)

#### STATEMENT OF FINANCIAL AFFAIDS

		Continuation Sheet No. 3	K3		
	14. Property held for another person				
None	List all property owned by another person that the debtor hol	ds or controls.			
	NAME AND ADDRESS OF OWNER Rita Adler 1155 Pleasant Valley Way West Orange, NJ 07052	DESCRIPTION AND VALUE OF PROPERTY Debtor's mother's jewelry	LOCATION OF PROPERTY Atlantic Stewardship Bank 87 Berdan Avenue Wayne, NJ 07470		
	15. Prior address of debtor				
None	If the debtor has moved within THREE YEARS immediately during that period and vacated prior to the commencement of spouse.		·		
	ADDRESS	NAME USED	DATES OF OCCUPANCY		
	114 Warbler Drive Wayne, NJ	Karen Barel	1993-2012		
None	16. Spouses and Former Spouses  If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within EIGHT YEARS immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.				
	17. Environmental Information				
	For the purpose of this question, the following definitions ap	ply:			
	"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.				
	"Site" means any location, facility, or property as defined unoby the debtor, including, but not limited to, disposal sites.	der any Environmental Law, whether	or not presently or formerly owned or operated		
	"Hazardous Material" means anything defined as a hazardou contaminant or similar term under an Environmental Law.	us waste, hazardous substance, toxid	c substance, hazardous material, pollutant, or		
None	a. List the name and address of every site for which the debendentially liable under or in violation of an Environmental Law:  Environmental Law:				
None  ✓	b. List the name and address of every site for which the det Indicate the governmental unit to which the notice was sent		al unit of a release of Hazardous Material.		

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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B7 (Official Form 7) (04/13)

# UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

In re: Karen Barel Case No. (if known)

#### STATEMENT OF FINANCIAL AFFAIRS

Continuation Sheet No. 4

#### 18. Nature, location and name of business

None

✓

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within SIX YEARS immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

None

✓

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within SIX YEARS immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement ONLY if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

✓

a. List all bookkeepers and accountants who within TWO YEARS immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

None

✓

b. List all firms or individuals who within TWO YEARS immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

None

✓

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within TWO YEARS immediately preceding the commencement of this case.

#### 20. Inventories

None

✓

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

B7 (Official Form 7) (04/13)

# UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

In re:	Karen Barel	Case No.	
			(if known)

# STATEMENT OF FINANCIAL AFFAIRS Continuation Sheet No. 5

	oo na	radion once iv	. J	
None	e a. If the debtor is a partnership, list the nature and percentage of		erest of each member of the partnership.	
None	b. If the debtor is a corporation, list all officers and directors of the holds 5 percent or more of the voting or equity securities of the control of th	•	and each stockholder who directly or indirectly owns, controls, or	
None  ✓	e a. If the debtor is a partnership, list each member who withdrew commencement of this case.		ship within ONE YEAR immediately preceding the	
None  ✓	<ul> <li>b. If the debtor is a corporation, list all officers or directors whos preceding the commencement of this case.</li> </ul>	e relationship wi	th the corporation terminated within ONE YEAR immediately	
None	. If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form.			
None	If the debtor is a corporation, list the name and federal taxpaver-identification number of the parent corporation of any consolidated group for tax			
None	e If the debtor is not an individual, list the name and federal taxpay has been responsible for contributing at any time within SIX YEA	,	number of any pension fund to which the debtor, as an employer, preceding the commencement of the case.	
dec	ompleted by an individual or individual and spouse] clare under penalty of perjury that I have read the answers c chments thereto and that they are true and correct.	ontained in the	foregoing statement of financial affairs and any	
Date		griature	/s/ Karen Barel Karen Barel	
Date	e Si of	Debtor gnature Joint Debtor any)	rrai en Dai el	
Pena	alty for making a false statement. Fine of up to \$500,000 or	imprisonment	for up to 5 years, or both	

renaity for making a false st 18 U.S.C. §§ 152 and 3571

Case 15-28409-VFP Doc 1 Filed 09/30/15 Entered 09/30/15 15:21:38 Desc Main Document Page 34 of 49 UNITED STATES BANKRUPICY COURT

## UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

IN RE: Karen Barel CASE NO

CHAPTER 13

	DISCLOSURE OF	COMPENSATION OF ATTO	ORNEY FOR DEBTOR		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to acce	pt:	\$3,500.00		
	Prior to the filing of this statement I have	received:	<b>\$500.00</b>		
	Balance Due:		\$3,000.00		
2.	The source of the compensation paid to	me was:			
	☑ Debtor ☐ O	ther (specify)			
3.	The source of compensation to be paid to	o me is:			
		ther (specify) he remainder of fees are to be paid	through the Plan.		
1.	I have not agreed to share the above associates of my law firm.	e-disclosed compensation with any otl	ner person unless they are members and		
		☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;				
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.				
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.				
	9/30/2015	/s/ Scott J. Goldstein			
	Date	Scott J. Goldstein Law Offices of Scott J. Gold 280 West Main Street Denville, NJ 07834 Phone: (973) 453-2838 / Fa			
	/s/ Karen Barel Karen Barel				

# UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY NEWARK DIVISION

IN RE: Karen Barel CASE NO

CHAPTER 13

## **VERIFICATION OF CREDITOR MATRIX**

	The above named Deb	btor hereby verifies th	at the attached list o	f creditors is true and c	orrect to the best of his/her
knowl	edge.				

Date .	9/30/2015	Signature /s/ Karen Barel
		Karen Barel
Date .		Signature

AMEX
P.O. BOX 981537
EL PASO, TX 79998

Ariel Barel 114 Warbler Drive Wayne, NJ 07470

ChexSystems Collection Agency, Inc. 7805 Hudson Road, Ste 100 Saint Paul, MN 55125-0000

Equifax Information Services, LLC PO Box 740256 Atlanta, GA 30374-0000

Experian 476 Anton Boulevard Costa Mesa, CA 92626-0000

Green Tree Servicing, LLC 345 St. Peter Street Saint Paul, MN 55102

Internal Revenue Service Internal Revenue Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346

New Jersey Division of Taxation Bankruptcy Section PO Box 245 Trenton, NJ 08695

Phelan Hallinan and Diamond, PC 400 Fellowship Road Mount Laurel, NJ 08054-0000

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Piekarsky and Associates 191 Godwin Avenue, Suite 9 Wyckoff, NJ 07481

PNC BANK 103 BELLEVUE PKWY WILMINGTON, DE 19809

Stonebridge at Wayne c/o Piekarsky & Associates 191 Godwin Avenue, Suite 9 Wyckoff, NJ 07481

Superior Court of New Jersey 77 Hamilton Street Paterson, NJ 07505-0000

SYNCB/JCP PO BOX 965007 ORLANDO, FL 32896

Transunion
P.O. Box 6790
Fullerton, CA 92834-0000

Case 15-28409-VFP Doc 1 Filed 09/30/15 Entered 09/30/15 15:21:38 Desc Main Document Check as directed in lines 17 and 21: Fill in this information to identify your case: According to the calculations required by this Debtor 1 Karen Barel Statement: Middle Name First Name Last Name 1. Disposable income is not determined Debtor 2 (Spouse, if filing) First Name under 11 U.S.C. § 1325(b)(3). Middle Name Last Name 2. Disposable income is determined United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY under 11 U.S.C. § 1325(b)(3). 3. The commitment period is 3 years. Case number (if known) 4. The commitment period is 5 years. ☐ Check if this is an amended filing Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period 12/14 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known). Part 1: **Calculate Your Average Monthly Income** What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B **Debtor 1** Debtor 2 or non-filing spouse Your gross wages, salary, tips, bonuses, overtime, and commissions \$6,724.42 (before all payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse \$0.00 if Column B is filled in. All amounts from any source which are regularly paid for household \$0.00 expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. Net income from operating a business, profession, or farm \$0.00 Gross receipts (before all deductions) \$0.00 Ordinary and necessary operating expenses Copy \$0.00 here → \$0.00 Net monthly income from a business, profession, or farm Net income from rental and other real property \$0.00 Gross receipts (before all deductions)

Official Form 22C-1

Interest, dividends, and royalties

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

\$0.00 here →

\$0.00

\$0.00

\$0.00

Page 39 of 49 Document Debtor 1 First Name Middle Name Last Name Column A Column B Debtor 1 Debtor 2 or non-filing spouse **Unemployment compensation** \$0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ...... For you..... Pension or retirement income. Do not include any amount received that \$0.00 was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10c. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. \$6,724.42 \$6,724.42 Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** \$6,724.42 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. \$0.00 \$0.00 Copy.here..... 13d. **−** 13d. Total..... \$6,724.42 14. Your current monthly income. Subtract line 13d from line 12. 15. Calculate your current monthly income for the year. Follow these steps: \$6,724.42 12 Multiply line 15a by 12 (the number of months in a year). \$80,693.04 15b. The result is your current monthly income for the year for this part of the form.

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Case 15-28409-VFP

Doc 1

	C	ase	15-28	409-VF	P Doc		1 09/30					.5:21:38	
Deb	tor 1		aren			Docu		Pa	ge 4ပု	Of 49 ase number	(if known)		
		Fir	st Name	Mid	dle Name	Last Nar	me						
16.	Calc	ulate	the media	n family inc	ome that app	olies to you.	Follow the	ese step	s:				
	16a.	Fill	in the state	in which yo	u live.	_	New	/ Jerse	у	_			
	16b.	Fill	in the numb	er of people	e in your hous	ehold.		1		_			
	16c.	To f	find a list of	applicable	come for your median incom This list may a	ne amounts,	go online u	ising the	link spe	ecified in the		16c	\$61,243.00
17.	How	do th	ne lines co	mpare?									
	17a.				•			-					s not determined
	470			•	. , . ,					•	,	Official Form 2	•
	1/b.	Ø	11 U.S.C.	§ 1325(b)(3		3 and fill or	ut Calculat	tion of D				ne is determine orm 22C-2).	ed under On line 39 of that
Pa	art 3		Calculate	Your Co	mmitment	Period U	nder 11	U.S.C.	§ 132	5(b)(4)			
18.	Cop	y you	r total aver	age month	ly income fro	m line 11.						18.	\$6,724.42
19.	that	calcul	ating the co		if it applies. period under 1 e 13d.								
	If the	marit	tal adjustme	ent does no	t apply, fill in (	on line 19a	l.					19a.	\$0.00
	Sub	tract I	ine 19a fro	m line 18.								19b.	\$6,724.42
20.	Calc	ulate	your curre	nt monthly	income for t	<b>he year.</b> Fo	ollow these	steps:					
	20a.	Cop	y line 19b									20a	\$6,724.42
		Mul	tiply by 12 (	the number	of months in	a year).							X 12
	20b.	The	result is yo	our current r	nonthly incom	e for the yea	ar for this pa	art of the	e form.			20b	\$80,693.04
	20c.	Сор	y the media	an family in	come for your	state and size	ze of house	ehold fro	m line 1	6c		20c	\$61,243.00
21.	How	do th	ne lines coi	mpare?									
					c. Unless oth nt period is 3		•	court, on	the top	of page 1 c	f this form,		
	$\overline{\mathbf{V}}$			•	ual to line 20c ne commitmen			-		t, on the top	o of page 1		
Pa	art 4	: ;	Sign Bel	ow									
	By s	igning	here, unde	r penalty of	perjury I decl	are that the i	information	on this	stateme	nt and in ar	ny attachme	nts is true and	d correct.
	X	/s/ K	aren Bare	e <b>l</b>				Y					
	^ -		n Barel					Sig	gnature	of Debtor 2			
	Г	ate (	9/30/2015					Da	ıte				
	_	_	MM / DD / Y					26		/ DD / YYY	Υ		
	If yo	u ched	cked 17a, d	o NOT fill o	ut or file Form	22C-2.							

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in this in	nformation to i	identify your case	:	
Debtor 1	Karen		Barel	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	g) First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the: <b>DISTRICT OF</b>	NEW JERSEY	
Case number				
(if known)				

### Official Form 22C-2

### **Chapter 13 Calculation of Your Disposable Income**

12/14

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 22C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

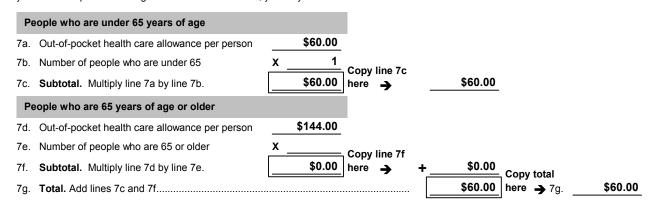
Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

#### National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items. \$585.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.



Case 15-28409-VFP Filed 09/30/15 Entered 09/30/15 15:21:38 Desc Main Doc 1 Page 42 of 49 Document Debtor 1 Karen First Name Middle Name Last Name **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: ■ Housing and utilities -- Insurance and operating expenses Housing and utilities -- Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities -- Insurance and operating expenses: Using the number of people you entered in line 5, \$550.00 fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities -- Mortgage or rent expenses: \$1,629.00 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Repeat this Copy line 9b amount on \$0.00 \$0.00 9b. Total average monthly payment line 33a. 9c. Net mortgage or rent expense. Copy line 9c Subtract line 9b (total average monthly payment) from line 9a (mortgage or \$1,629.00 \$1.629.00 rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12.  $\overline{\mathbf{Q}}$ 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the \$342.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

	Case 15	5-28409	-VFP	Doc 1								5:21:38	Desc Main
Debto			Middle N	lama	Docun Barei		Pa	ge 45	ase nu	19 imber	(if known)		
	First Na	ame	iviladie i	vame	Last Name	9							
13.	Vehicle own expense for extra vehicle.	each vehicle	e below. Y	ou may not c	claim the ex	pense if y	ou do n	ot make			•		
	Vehicle 1	Describe	Vehicle 1	:									
	13a. Ownersł	hip or leasir	ng costs us	ing IRS Loca	al Standard				138	a	\$517.00		
	13b. Average	monthly page	ayment for	all debts sec	cured by Ve	hicle 1.							
	Do not i	nclude cost	s for lease	d vehicles.									
	amounts	s that are co	ontractually	thly payment due to each Then divide b	secured cr								
	Name	of each cr	editor for \	/ehicle 1		verage mo	onthly						
					<b>-</b>	.,		Copy '	13b			Repeat this amount on	
							_	here	→ .	_	\$0.00	line 33b.	
												Copy net Vehicle 1	
	13c. Net Veh		•	se expense.  If this amo		than \$0 e	enter \$0		13c		\$517.00	expense	\$517.00
	Cubildo	-	om mic roc	i. II tillo tilli	Juni 15 1655	triair ψo, c	πιοι ψο	•	130	·L	\$517.00	here →	Ψ517.00
	Vehicle 2	Describe	Vehicle 2	:									
	13d. Ownersł	hip or leasir	ng costs us	ing IRS Loca	al Standard				130	d			
	13e. Average costs for	e monthly particular in the monthly particul	•	all debts sec	cured by Ve	hicle 2. D	o not in	ıclude					
	Name	of each cr	editor for \	/ehicle 2		verage mo	onthly						
								Сору				Repeat this amount on	
								here	→ .	_		line 33c.	
												Copy net Vehicle 2	
	13f. Net Veh Subtract			ise expense. this amount		s0. enter	\$0.		13f.			expense here	\$0.00
14.	Public trans	portation e	xpense: I	f you claimed	d 0 vehicles	s in line 11	, using		Local	L—	dards, fill in t	, -	\$0.00
15.	Additional palso deduct a	ublic trans a public tran	portation ensportation	expense: If yexpense, you	you claimed u may fill in	I 1 or more what you	e vehicl believe	es in lin	e 11 a			, ,	\$0.00
Oth	er Necessary	Expenses		dition to the ving IRS cate		eductions I	isted al	oove, yo	ou are	allowe	ed your mon	thly expense	s for the
16.	Taxes: The semployment syour pay for the and subtract Do not include	taxes, socia hese taxes that numbe	al security t . However, r from the t	axes, and Mo if you expect otal monthly	edicare taxe ct to receive	es. You m e a tax refu	nay incl und, you	ude the u must o	month divide t	ly am	ount withhel	d from	\$1,936.34

	Case 15-28409	-VFP [	Doc 1	Filed 09/30			ed 09/30/15 15:21:3	88 Desc Main		
Debto				Document	Pa	ge 44 C	of 49 e number (if known)			
	First Name	Middle Nam	ie	Last Name						
17.	union dues, and uniform	costs.	, ,			•	such as retirement contribution tributions or payroll savings.	s, <b>\$518.48</b>		
	Do not include amounts	illat are not re	quileu by	your job, such as ve	olulitaly	401(K) COH	unbullons of payroll savings.			
18.	filing together, include pa	ayments that y for life insura	ou make	for your spouse's te	rm life ir	nsurance.	ance. If two married people are	<b>\$89.27</b>		
19.	agency, such as spousal	or child supp	ort payme	ents.	·	•	order of a court or administrativ			
20.	Education: The total mo	r job, or		•		•		\$0.00		
	<ul><li>for your physically or</li></ul>	mentally chall	enged de	pendent child if no p	oublic ed	lucation is	available for similar services.			
21.	<b>Childcare:</b> The total mo Do not include payments	•		•			laycare, nursery, and preschoo	ol. <b>\$0.00</b>		
22.		and welfare of Include only t	of you or y the amour	our dependents and nt that is more than t	l that is i the total	not reimbur entered in		sat \$340.00		
23.	3. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted.									
24.	Add all of the expenses Add lines 6 through 23.	allowed und	ler the IR	S expense allowan	ices.			\$6,567.09		
Add	itional Expense Deducti			dditional deductions include any expens		-				
25.	Health insurance, disability insurance, disability insurance, or your dependent	rance, and he		-	-		e monthly expenses for health ssary for yourself, your			
	Health insurance			\$145.71						
	Disability insurance			\$18.09						
	Health savings account			\$0.00						
	Total			\$163.80	Copy t	otal here	<b>→</b>	\$163.80		
	Do you actually spend th	is total amour	nt?							
	No. How much do y	/ou actually s	pend?							
	<b>☑</b> Yes									
26.	Continued contribution will continue to pay for the member of your householders.	e reasonable	and nece	ssary care and supp	ort of a	n elderly, cl	-	\$0.00		
27.	-	mily under the	e Family √	iolence Prevention	and Ser	•	at you incur to maintain the or other federal laws that apply.	\$0.00		

	Ca	se 15-2840	9-VFP	Doc 1	Filed 09/30			09/30/15 1	L5:21:38	Desc Main		
Debto	or 1	Karen First Name	Middle N	lama	Document Last Name	Page -	45 OT 4	<b>49</b> umber (if known)				
		FIISt Name	Middle N	lame	Last Name							
28.		tional home energance on line 8.	gy costs. Yo	our home en	ergy costs are includ	ded in your no	on-mortga	age housing and	utilities			
	-	•			that are more than the fill in the excess amo				non-			
		nust give your cas int claimed is reas			of your actual expe	nses, and yo	u must sł	now that the addi	tional			
29.	\$156.		you pay for	your depend	who are younger th dent children who are					\$0.00		
					of your actual expended for accounted for			oplain why the an	nount			
	* Sub	ject to adjustment	on 4/01/16,	and every 3	years after that for o	cases begun	on or afte	er the date of adj	ustment.			
30.	highe	r than the combine	ed food and	clothing allo	nonthly amount by wl wances in the IRS N the IRS National Sta	ational Stand						
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.											
	You must show that the additional amount claimed is reasonable and necessary.											
31.	<b>31. Continuing charitable contributions.</b> The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).  Do not include any amount more than 15% of your gross monthly income.											
		•		•		come.						
32.		all of the addition ines 25 though 31	-	deductions						\$163.80		
Ded	luction	s for Debt Paym	ent									
33.		lebts that are sec s, and other secu	-	•	property that you ov a through 33g.	vn, includin	g home r	nortgages, vehi	cle			
		llculate the total av O months after you	-		, add all amounts tha en divide by 60.	at are contrac	ctually du	e to each secure	d creditor in			
								erage monthly				
		Mortgages on y	our home				ра	yment				
	33a.	Copy line 9b her	e				<b>&gt;</b>	\$0.00				
		Loans on your f	first two veh	nicles								
	33b.	Copy line 13b he	ere				→	\$0.00				
	33c.	Copy line 13e he	ere				<b>&gt;</b>	\$0.00				
		e of each creditor secured debt	for		ify property that res the debt	Does pa include insurand	taxes or					
	33d.						No					
							Yes					
	33e.					<u></u>	No Yes					
	33f.						No <b>+</b>					
	JJ1.					— <u> </u>	Yes					
									Copy total			

	Case	15-28409-	VFP	Doc 1		09/30/15 ent Pa			.5:21:38	Desc Main
Debto		ren Name	Middle I	Name	Docum Barel Last Name		Case n	49 umber (if known)		
24	Aro any d	obte that you lie	stad in li	no 22 cocur	od by your	nrimaru rocido	nco a vohicle	e, or other prope	ets e	
34.		y for your suppo					nce, a venici	e, or other prope	ıy	
	✓ No.	Go to line 35.								
	Yes.	•	-					listed in line 33, to fill in the informat	•	
Maria	ne of the cr						ide by 66 dila		lon below.	
Nan	ne of the cr	realtor		y property to s the debt	nat	Total cure amount		Monthly cure amount		
							÷ 60 =			
						-				
							_ ÷ 60 =			
							_ ÷ 60 = +			
							Total	\$0.00	Copy total	\$0.00
25	Da waw as				amitu ( tau ) ala	ده خده سدی اوال	_	<u> </u>	here →	
35.	alimony	we any priority o - that are past d		-	-					
	11 U.S.C.	•								
	□ No. ✓ Yes.	Go to line 36. Fill in the total a	amount o	of all of these	priority clai	ms. Do not incl	lude			
		current or ongo	ing prior	rity claims, su	ich as those	you listed in lin	ne 19.			
		Total amount o	f all past	t-due priority	claims			\$3,000.00	÷ 60 =	\$50.00
36.	Projected	monthly Chapt	er 13 pla	an payment				\$537.87		
		ultiplier for your o								
		he United States ecutive Office for					ina) or			
	To find a li	ist of district mult	tipliers th	nat includes v	our district.	ao online usina	the link	x6.9	%	
	specified i	n the separate in kruptcy clerk's of	struction							
	at the ban	Kiupicy cierk's or	iice.						Conv. total	
	Average n	nonthly administr	ative exp	pense				\$37.11	Copy total here	\$37.11
37.		the deductions	for deb	t payment.						*****
	Add lines	33g through 36.								\$87.11
Tota	al Deductio	ons from Income	•							
38.	Add all of	the allowed de	ductions	š.						
	Copy line	24, All of the exp	oenses a	allowed under	r IRS expens	se allowances		\$6,567.09		
	Copy line	32, All of the add	ditional e	expense dedu	uctions			\$163.80		
	Copy line	37, All of the dec	ductions	for debt payı	ment		+	\$87.11		
	Total dedu	ıctions						\$6,818.00	Copy total	\$6,818.00
									here →	<del></del>
Pai	rt 2: D	etermine You	ur Disp	osable In	come Und	der 11 U.S.C	i. § 1325(b)	(2)		
39.	Copy you	r total current n	nonthly i	income from	line 14 of I	orm 22C-1, CI	napter 13			4
	Statemen	t of Your Currer	t Month	ly Income a	nd Calculat	ion of Commit	ment Period			\$6,724.42

	Case 15	5-2840	9-VFP	Doc 1				1 09/30/15						
Debto	r 1 <b>Karen</b>	1			Document	Pa	ge 47 of	<b>49</b> number (if known)						
	First Na	me	Middle N	ame	Last Name		<del>_</del>							
40.	The monthly a disability payr	average of the nents for in accord	of any child su a dependent dance with app	upport paym child, repor olicable non	receive for supplents, foster care p ted in Part 1 of For bankruptcy law to child.	ayments, rm 22C-1,	or that	Iren.						
41.	your employe plans, as spe	r withheld cified in	d from wages 11 U.S.C. § 5	as contribut 41(b)(7) plus	ne monthly total of tions for qualified r s all required repay . § 362(b)(19).	etirement		\$0.00						
42.					.C. § 707(b)(2)(A).		<b>&gt;</b>	\$6,818.00						
43.	expenses and circumstance	d you haves and the	eir expenses.	ble alternati You must g	cial circumstances ive, describe the sp give your case trust ocumentation for the	pecial tee a deta	iled							
	Describe th	e specia	al circumstar	ices	Amount	of expen	se							
	43a													
	43b													
	43c				+									
	43d. <b>Total.</b> A	dd lines 4	43a through 4	3c		\$0.00	Copy 43d here	÷ \$0.00						
44.	Total adjustr	nents. /	Add lines 40 t	hrough 43d.				\$6,818.00	Copy tota	<b>-</b> \$6,818.00				
45.	Calculate yo	ur montl	nly disposabl	e income u	ınder § 1325(b)(2)	. Subtrac	t line 44 from	line 39.		(\$93.58)				
Par	t 3: Cha	nge in	Income or	Expense	es									
46.	Change in Income or Expenses  Change in income or expenses. If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.													
	Form	Line	Reason for	change			Date of cl	•	crease or a	Amount of change				
	☐ 22C-1 ☐ 22C-2								Increase Decrease					
	22C-1						_		Increase Decrease					
	☐ 22C-2							L	Increase					
	22C-2						_		Decrease					
	☐ 22C-1								Increase					
	☐ 22C-2								Decrease	-				

Ca	ase 15-28409	-VFP Doc 1		— -	Entered 09/30/15 15:21:3	BB Desc Main
Debtor 1	Karen	Document Barel	Pa	uge 48 of 49 Case number (if known)		
	First Name	Middle Name	Last Name			
Part 4:	Sign Below					
By si	igning here, under pe	enalty of perjury you	declare that the inform	nation o	n this statement and in any attachments is	true and correct.
Y	/s/ Karen Barel			Y		
	Karen Barel			^	Signature of Debtor 2	
D	Date 9/30/2015				Date	

MM / DD / YYYY

MM / DD / YYYY

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# Document Page 49 of 49 Current Monthly Income Calculation Details

In re: **Karen Barel**Case Number:
Chapter:

## 2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income	Description (if	f available)					
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor	Waye Twp B \$9,446.00		\$9,446.00	\$9,446.00	\$0.00	\$0.00	\$6,297.33
<u>Debtor</u>	Fairleigh Dic \$625.00	kinson Unive	ersity \$312.50	\$0.00	\$0.00	\$0.00	\$260.42
<u>Debtor</u>	Tutoring \$0.00	\$0.00	\$0.00	\$0.00	\$1,000.00	,	\$166.67